

**Fwd: Health Check up Booking Re Schedule Request(bobE46659),Package Code-PKG10000238, Beneficiary Code-60059**

1 message

**Chandan Health Care** <appointment.chcl@gmail.com>  
To: idcashiyana@gmail.com

Sat, Sep 30, 2023 at 10:46 AM

Pack code: 2613

----- Forwarded message -----

From: **Mediwheel** <wellness@mediwheel.in>

Date: Fri, 29 Sept 2023 at 18:03

Subject: Health Check up Booking Re Schedule Request(bobE46659),Package Code-PKG10000238, Beneficiary Code-60059

To: &lt;appointment.chcl@gmail.com&gt;

Cc: &lt;customercare@mediwheel.in&gt;



**Mediwheel**  
...Your wellness partner



011-41195959

Email:wellness@mediwheel.in

Dear **Chandan Healthcare Limited**,

Diagnostic/Hospital Location :**M-214/215 Sec G LDA Colony Near Power House Chauraha Kanpur road, City:Lucknow**

We regret to state that following request for Health check up appointment has been Re Scheduled by you. Please let us know if request had not been Re Schedule from your end. We will ask the user to make a fresh request for the same.

**Booking Code** : bobE46659  
**Appointment Date** : 30-09-2023  
**Appointment Time** : 8:00am-12:00pm  
**Beneficiary Name** : MR. PRAVEEN PRAKHAR  
**Package Name** : Full Body Health Checkup Male Below 40  
**Member Age** : 32  
**Member Relation** : Employee  
**Member Gender** : Male  
**Address of Diagnostic/Hospital** : M-214/215 Sec G LDA Colony Near Power House Chauraha Kanpur road  
**City** : Lucknow  
**State** : Uttar Pradesh  
**Pincode** : 226012  
**Contact Details** : 8299578053  
**Email** : appointment.chcl@gmail.com



Please login to your account to confirm the same. Also you mail us for confirmation.



भारतीय विशिष्ट पहचान प्राधिकरण

भारत सरकार  
Unique Identification Authority of India  
Government of India

नामांकन क्रम/ Enrolment No.: 2189/11044/06958

Download Date: 27/08/2017 Generation Date: 15/07/2016

To  
प्रखर प्रवीण  
Prakhar Praveen  
S/O: Jiyalal Kurael  
sector mashhyana  
677  
LDA Colony  
LDA Colony  
Lucknow Uttar Pradesh - 226012  
8455582920

Signature Not Verified  
Digitally signed by  
Prakhar Praveen  
DN: cn=Prakhar Praveen, o=Government of India, email=prakhar.praveen@uidai.gov.in



आपका आधार क्रमांक / Your Aadhaar No. :

2276 9920 9216

मेरा आधार, मेरी पहचान



भारत सरकार  
Government of India



प्रखर प्रवीण  
Prakhar Praveen  
जन्म तिथि/DOB: 12/07/1988  
पुरुष/ MALE

2276 9920 9216



भारतीय विशिष्ट पहचान प्राधिकरण  
Unique Identification Authority of India

पता:  
आम्बर: त्रिबल्लभपुरी, 677, सेक्टर एम अशिया, एम डी ए कॉलोनी, लखनऊ, उत्तर प्रदेश - 226012

Address:  
S/O: Jiyalal Kurael, 677, sector mashhyana, LDA Colony, Lucknow, Uttar Pradesh - 226012



2276 9920 9216

सूचना

- आधार पहचान का प्रमाण है, नागरिकता का नहीं।
- पहचान का प्रमाण ऑनलाइन ऑथेंटिकेशन द्वारा प्राप्त करें।
- यह एक इलेक्ट्रॉनिक प्रक्रिया द्वारा बना हुआ पत्र है।

INFORMATION

- Aadhaar is a proof of identity, not of citizenship.
- To establish identity, authenticate online.
- This is electronically generated letter.

- आधार देश भर में मान्य है।
- आधार भविष्य में सरकारी और गैर-सरकारी सेवाओं का लाभ उठाने में उपयोगी होगा।
- Aadhaar is valid throughout the country.
- Aadhaar will be helpful in availing Government and Non-Government services in future.



मेरा आधार मेरी पहचान

मेरा आधार मेरी पहचान



# CHANDAN DIAGNOSTIC CENTRE

Add: M-214/215, Sec G Lda Colony Near Power House Chauraha Kanpur Road  
Ph: 9235432707,  
CIN : U85110DL2003PLC308206



Patient Name	: Mr.PRAVEEN PRAKHAR	Registered On	: 30/Sep/2023 11:00:14
Age/Gender	: 32 Y 0 M 0 D /M	Collected	: 30/Sep/2023 11:07:26
UHID/MR NO	: CDCA.0000070626	Received	: 30/Sep/2023 12:17:27
Visit ID	: CDCA0210752324	Reported	: 30/Sep/2023 15:09:27
Ref Doctor	: Dr.Mediwheel - Arcofemi Health Care Ltd.	Status	: Final Report

## DEPARTMENT OF HAEMATOLOGY

### MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method
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#### Blood Group (ABO & Rh typing) \* , Blood

Blood Group	B			ERYTHROCYTE MAGNETIZED TECHNOLOGY / TUBE AGGLUTINA
Rh ( Anti-D)	POSITIVE			ERYTHROCYTE MAGNETIZED TECHNOLOGY / TUBE AGGLUTINA

#### Complete Blood Count (CBC) \* , Whole Blood

Haemoglobin	13.20	g/dl	1 Day- 14.5-22.5 g/dl 1 Wk- 13.5-19.5 g/dl 1 Mo- 10.0-18.0 g/dl 3-6 Mo- 9.5-13.5 g/dl 0.5-2 Yr- 10.5-13.5 g/dl 2-6 Yr- 11.5-15.5 g/dl 6-12 Yr- 11.5-15.5 g/dl 12-18 Yr 13.0-16.0 g/dl Male- 13.5-17.5 g/dl Female- 12.0-15.5 g/dl	
TLC (WBC)	5,300.00	/Cu mm	4000-10000	ELECTRONIC IMPEDANCE
<u>DLC</u>				
Polymorphs (Neutrophils )	64.00	%	55-70	ELECTRONIC IMPEDANCE
Lymphocytes	29.00	%	25-40	ELECTRONIC IMPEDANCE
Monocytes	4.00	%	3-5	ELECTRONIC IMPEDANCE
Eosinophils	3.00	%	1-6	ELECTRONIC IMPEDANCE
Basophils	0.00	%	<1	ELECTRONIC IMPEDANCE
<u>ESR</u>				
Observed	12.00	Mm for 1st hr.		
Corrected	6.00	Mm for 1st hr.	<9	
PCV (HCT)	40.00	%	40-54	
Platelet count				
Platelet Count	1.6	LACS/cu mm	1.5-4.0	ELECTRONIC IMPEDANCE/MICROSCOPIC
PDW (Platelet Distribution width)	16.60	fL	9-17	ELECTRONIC IMPEDANCE
P-LCR (Platelet Large Cell Ratio)	54.30	%	35-60	ELECTRONIC IMPEDANCE



SIN No:64299316

Customer Care No.: +91-9918300637 E-mail: customercare.diagnostic@chandan.co.in Web: www.chandan.co.in

Home Sample Collection  
1800-419-0002



# CHANDAN DIAGNOSTIC CENTRE

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### MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method
PCT (Platelet Hematocrit)	0.22	%	0.108-0.282	ELECTRONIC IMPEDANCE
MPV (Mean Platelet Volume)	14.10	fL	6.5-12.0	ELECTRONIC IMPEDANCE
RBCCount				
RBC Count	4.60	Mill./cu mm	4.2-5.5	ELECTRONIC IMPEDANCE
Blood Indices (MCV, MCH, MCHC)				
MCV	86.95	fl	80-100	CALCULATED PARAMETER
MCH	28.80	pg	28-35	CALCULATED PARAMETER
MCHC	33.80	%	30-38	CALCULATED PARAMETER
RDW-CV	12.20	%	11-16	ELECTRONIC IMPEDANCE
RDW-SD	40.10	fL	35-60	ELECTRONIC IMPEDANCE
Absolute Neutrophils Count	3,392.00	/cu mm	3000-7000	
Absolute Eosinophils Count (AEC)	159.00	/cu mm	40-440	

Dr. R.K. Khanna  
(MBBS, DCP)



SIN No:64299316





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Patient Name	: Mr.PRAVEEN PRAKHAR	Registered On	: 30/Sep/2023 11:00:16
Age/Gender	: 32 Y 0 M 0 D /M	Collected	: 30/Sep/2023 11:07:26
UHID/MR NO	: CDCA.0000070626	Received	: 30/Sep/2023 12:35:14
Visit ID	: CDCA0210752324	Reported	: 30/Sep/2023 13:03:51
Ref Doctor	: Dr.Mediwheel - Arcofemi Health Care Ltd.	Status	: Final Report

## DEPARTMENT OF BIOCHEMISTRY

### MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method
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#### GLUCOSE FASTING \* , Plasma

Glucose Fasting	99.20	mg/dl	< 100 Normal 100-125 Pre-diabetes ≥ 126 Diabetes	GOD POD
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#### Interpretation:

- Kindly correlate clinically with intake of hypoglycemic agents, drug dosage variations and other drug interactions.
- A negative test result only shows that the person does not have diabetes at the time of testing. It does not mean that the person will never get diabetes in future, which is why an Annual Health Check up is essential.
- I.G.T = Impaired Glucose Tolerance.



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Age/Gender	: 32 Y 0 M 0 D /M	Collected	: 30/Sep/2023 11:07:26
UHID/MR NO	: CDCA.0000070626	Received	: 30/Sep/2023 16:53:59
Visit ID	: CDCA0210752324	Reported	: 30/Sep/2023 18:46:10
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## DEPARTMENT OF BIOCHEMISTRY

### MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method
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#### GLYCOSYLATED HAEMOGLOBIN (HbA1C) \*\* , EDTA BLOOD

Glycosylated Haemoglobin (HbA1c)	5.00	% NGSP		HPLC (NGSP)
Glycosylated Haemoglobin (HbA1c)	31.00	mmol/mol/IFCC		
Estimated Average Glucose (eAG)	96	mg/dl		

#### Interpretation:

##### NOTE:-

- eAG is directly related to A1c.
- An A1c of 7% -the goal for most people with diabetes-is the equivalent of an eAG of 154 mg/dl.
- eAG may help facilitate a better understanding of actual daily control helping you and your health care provider to make necessary changes to your diet and physical activity to improve overall diabetes management.

The following ranges may be used for interpretation of results. However, factors such as duration of diabetes, adherence to therapy and the age of the patient should also be considered in assessing the degree of blood glucose control.

Haemoglobin A1C (%)NGSP	mmol/mol / IFCC Unit	eAG (mg/dl)	Degree of Glucose Control Unit
> 8	>63.9	>183	Action Suggested*
7-8	53.0 -63.9	154-183	Fair Control
< 7	<63.9	<154	Goal**
6-7	42.1 -63.9	126-154	Near-normal glycemia
< 6%	<42.1	<126	Non-diabetic level

\*High risk of developing long term complications such as Retinopathy, Nephropathy, Neuropathy, Cardiopathy, etc.

\*\*Some danger of hypoglycemic reaction in Type 1diabetics. Some glucose intolerant individuals and "subclinical" diabetics may demonstrate HbA1C levels in this area.

N.B. : Test carried out on Automated VARIANT II TURBO HPLC Analyser.

#### Clinical Implications:

\*Values are frequently increased in persons with poorly controlled or newly diagnosed diabetes.

\*With optimal control, the HbA 1c moves toward normal levels.

\*A diabetic patient who recently comes under good control may still show higher concentrations of glycosylated hemoglobin. This level declines gradually over several months as nearly normal glycosylated \*Increases in glycosylated hemoglobin occur in the following non-diabetic conditions: a. Iron-deficiency anemia b. Splenectomy



SIN No:64299316





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c. Alcohol toxicity d. Lead toxicity

\*Decreases in A 1c occur in the following non-diabetic conditions: a. Hemolytic anemia b. chronic blood loss

\*Pregnancy d. chronic renal failure. Interfering Factors:

\*Presence of Hb F and H causes falsely elevated values. 2. Presence of Hb S, C, E, D, G, and Lepore (autosomal recessive mutation resulting in a hemoglobinopathy) causes falsely decreased values.



**Dr. Anupam Singh (MBBS MD Pathology)**



SIN No:64299316



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UHID/MR NO	: CDCA.0000070626	Received	: 30/Sep/2023 12:22:01
Visit ID	: CDCA0210752324	Reported	: 30/Sep/2023 13:29:52
Ref Doctor	: Dr.Mediwheel - Arcofemi Health Care Ltd.	Status	: Final Report

## DEPARTMENT OF BIOCHEMISTRY

### MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method
BUN (Blood Urea Nitrogen) * Sample: Serum	9.12	mg/dL	7.0-23.0	CALCULATED
Creatinine * Sample: Serum	0.85	mg/dl	0.5-1.30 Spot Urine-Male- 20-275 Female-20-320	MODIFIED JAFFES
Uric Acid * Sample: Serum	9.30	mg/dl	3.4-7.0	URICASE
<b>LFT (WITH GAMMA GT) * , Serum</b>				
SGOT / Aspartate Aminotransferase (AST)	29.68	U/L	< 35	IFCC WITHOUT P5P
SGPT / Alanine Aminotransferase (ALT)	26.53	U/L	< 40	IFCC WITHOUT P5P
Gamma GT (GGT)	16.19	IU/L	11-50	OPTIMIZED SZAZING
Protein	6.26	gm/dl	6.2-8.0	BIURET
Albumin	4.56	gm/dl	3.4-5.4	B.C.G.
Globulin	1.70	gm/dl	1.8-3.6	CALCULATED
A:G Ratio	2.68		1.1-2.0	CALCULATED
Alkaline Phosphatase (Total)	97.95	U/L	42.0-165.0	IFCC METHOD
Bilirubin (Total)	0.55	mg/dl	0.3-1.2	JENDRASSIK & GROF
Bilirubin (Direct)	0.17	mg/dl	< 0.30	JENDRASSIK & GROF
Bilirubin (Indirect)	0.38	mg/dl	< 0.8	JENDRASSIK & GROF
<b>LIPID PROFILE ( MINI ) * , Serum</b>				
Cholesterol (Total)	209.00	mg/dl	<200 Desirable 200-239 Borderline High > 240 High	CHOD-PAP
HDL Cholesterol (Good Cholesterol)	45.85	mg/dl	30-70	DIRECT ENZYMATIC
LDL Cholesterol (Bad Cholesterol)	106	mg/dl	< 100 Optimal 100-129 Nr. Optimal/Above Optimal 130-159 Borderline High 160-189 High > 190 Very High	CALCULATED
VLDL	57.62	mg/dl	10-33	CALCULATED
Triglycerides	288.10	mg/dl	< 150 Normal 150-199 Borderline High 200-499 High >500 Very High	GPO-PAP



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# CHANDAN DIAGNOSTIC CENTRE

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## DEPARTMENT OF BIOCHEMISTRY

### MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method
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Dr. R.K. Khanna  
(MBBS, DCP)



SIN No:64299316



# CHANDAN DIAGNOSTIC CENTRE

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Visit ID	: CDCA0210752324	Reported	: 30/Sep/2023 14:18:37
Ref Doctor	: Dr.Mediwheel - Arcofemi Health Care Ltd.	Status	: Final Report

## DEPARTMENT OF CLINICAL PATHOLOGY

### MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method
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#### URINE EXAMINATION, ROUTINE\* , Urine

Color	PALE YELLOW			
Specific Gravity	1.015			
Reaction PH	Acidic ( 6.0 )			DIPSTICK
Protein	ABSENT	mg %	< 10 Absent 10-40 (+) 40-200 (++) 200-500 (+++) > 500 (++++)	DIPSTICK
Sugar	ABSENT	gms%	< 0.5 (+) 0.5-1.0 (++) 1-2 (+++) > 2 (++++)	DIPSTICK
Ketone	ABSENT	mg/dl	0.1-3.0	BIOCHEMISTRY
Bile Salts	ABSENT			
Bile Pigments	ABSENT			
Urobilinogen(1:20 dilution)	ABSENT			
Microscopic Examination:				
Epithelial cells	FEW			MICROSCOPIC EXAMINATION
Pus cells	OCCASIONAL			
RBCs	ABSENT			MICROSCOPIC EXAMINATION
Cast	ABSENT			
Crystals	ABSENT			MICROSCOPIC EXAMINATION
Others	ABSENT			

#### SUGAR, FASTING STAGE\* , Urine

Sugar, Fasting stage	ABSENT	gms%
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Result Rechecked

#### Interpretation:

(+) < 0.5  
(++) 0.5-1.0  
(+++) 1-2



SIN No:64299316





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## DEPARTMENT OF CLINICAL PATHOLOGY

### MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method
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Dr. R.K. Khanna  
(MBBS,DCP)



SIN No:64299316



# CHANDAN DIAGNOSTIC CENTRE

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UHID/MR NO	: CDCA.0000070626	Received	: 30/Sep/2023 16:12:27
Visit ID	: CDCA0210752324	Reported	: 30/Sep/2023 17:03:48
Ref Doctor	: Dr.Mediwheel - Arcofemi Health Care Ltd.	Status	: Final Report

## DEPARTMENT OF IMMUNOLOGY

### MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method
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#### THYROID PROFILE - TOTAL \*\* , Serum

T3, Total (tri-iodothyronine)	125.62	ng/dl	84.61-201.7	CLIA
T4, Total (Thyroxine)	8.60	ug/dl	3.2-12.6	CLIA
TSH (Thyroid Stimulating Hormone)	2.280	μIU/mL	0.27 - 5.5	CLIA

#### Interpretation:

0.3-4.5	μIU/mL	First Trimester
0.5-4.6	μIU/mL	Second Trimester
0.8-5.2	μIU/mL	Third Trimester
0.5-8.9	μIU/mL	Adults 55-87 Years
0.7-27	μIU/mL	Premature 28-36 Week
2.3-13.2	μIU/mL	Cord Blood > 37Week
0.7-64	μIU/mL	Child(21 wk - 20 Yrs.)
1-39	μIU/mL	Child 0-4 Days
1.7-9.1	μIU/mL	Child 2-20 Week

- 1) Patients having low T3 and T4 levels but high TSH levels suffer from primary hypothyroidism, cretinism, juvenile myxedema or autoimmune disorders.
- 2) Patients having high T3 and T4 levels but low TSH levels suffer from Grave's disease, toxic adenoma or sub-acute thyroiditis.
- 3) Patients having either low or normal T3 and T4 levels but low TSH values suffer from iodine deficiency or secondary hypothyroidism.
- 4) Patients having high T3 and T4 levels but normal TSH levels may suffer from toxic multinodular goiter. This condition is mostly a symptomatic and may cause transient hyperthyroidism but no persistent symptoms.
- 5) Patients with high or normal T3 and T4 levels and low or normal TSH levels suffer either from T3 toxicosis or T4 toxicosis respectively.
- 6) In patients with non thyroidal illness abnormal test results are not necessarily indicative of thyroidism but may be due to adaptation to the catabolic state and may revert to normal when the patient recovers.
- 7) There are many drugs for eg. Glucocorticoids, Dopamine, Lithium, Iodides, Oral radiographic dyes, etc. which may affect the thyroid function tests.
- 8) Generally when total T3 and total T4 results are indecisive then Free T3 and Free T4 tests are recommended for further confirmation along with TSH levels.

\*\*\* End Of Report \*\*\*

(\*\*) Test Performed at Chandan Speciality L



Re: EXAMINATION, GLUCOSE PP, SUGAR, PP STAGE, ECG / EKG, X-RAY I **Dr. Anupam Singh (MBBS MD Pathology)**  
A/R & LOWER)

This report is not for medico legal purpose. If clinical correlation is not established, kindly repeat the test at no additional cost within seven days.

Facilities: Pathology, Bedside Sample Collection, Health Check-ups, Digital X-Ray, ECG (Bedside also), Allergy Testing, Test And Health Check-ups, Ultrasonography, Sonomammography, Bone Mineral Density (BMD), Doppler Studies, 2D Echo, CT Scan, MRI, Blood Bank, TMT, EEG, PFT, OPG, Endoscopy, Digital Mammography, Electromyography (EMG), Nerve Condition Velocity (NCV), Audiometry, Brainstem Evoked Response Audiometry (BERA), Colonoscopy, Ambulance Services, Online Booking Facilities for Diagnostics, Online Report Viewing \*  
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